

<u>FIG.1</u>

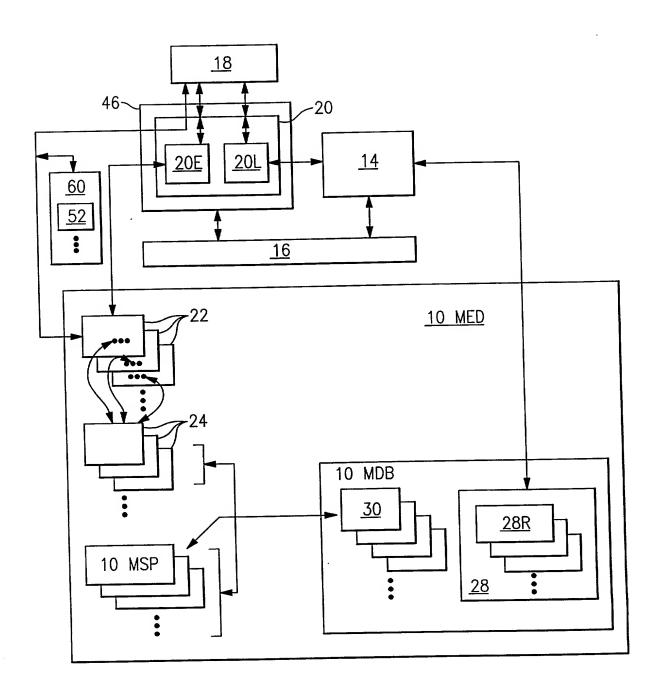
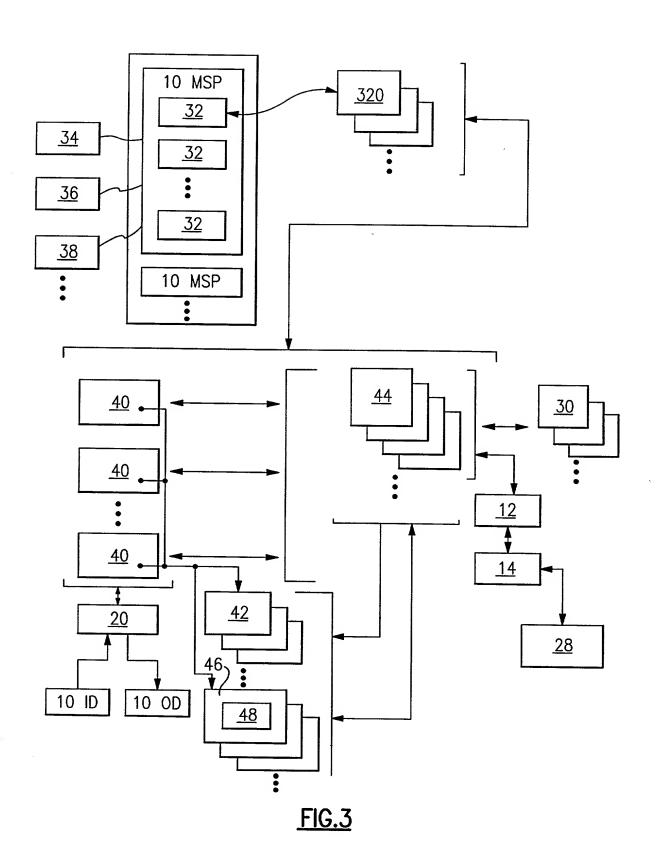


FIG.2



UPID O&E.CCC USA UPID		
LIPID O&E INFORMATION	COPYRIGHT 2001 CLINICAL CONTENI CONSULIANIS,	CONSULIANIS, LLC
LIPID MANAGEMENT ENT	ENTER DIAGNOSIS OF HYPERLIPIDEMIA IN PROBLEM LIST IF APPROPRIATE.	CADD_PROBLEM: CA
MOST RECENT LABS	LIPID FLOWSHEET VIEW CURRENT LIPID MEDS THERAPEUT	THERAPEUTIC RECOMMENDATIONS .
NCEP ADULT TREATMENT PANEL III RISK FACTORS		IN # RISK FACTORS
AGE 55 OR GREATER	O YES O NO CLICK ACTION BUTTON FOR NCEP RECOMMENDED LIPID GUALS. TO CLICK ACTION BUTTON YALLIES FINTER DIFFERENT VALUES	AMENDED LIPID GOALS. TO NITER DIFFERENT VALUES
EARLY MENOPAUSE W/O HRT	9N	S BELOW.
DIABETES	9	0-1 RISK FACTORS
HDL < 40 MG/DI	ON O	ADL: TRIG:
HDL > 60 MG/DI (NEG RISK FACTOR)		
FH OF CARDIOVASCULAR DISEASE:	AST VALUE: 250	198
MI IN FEMALE AGE < 55	NO LAST DATE: 02/07/2001 0	02/07/2001 02/07/2001
MI IN MALE AGE < 55	NEXT DUE:	02/07/2002 02/07/2002
SMOKING STATUS O CURRENT	QUIT O NEVER	
HYPERTENSION	SIDER INTE	. HDL GOAL HAS BEEN MET.
ASHD-LVH, ANGINA, MI, CABG	O YES O NO TRIGLYCERIDE GOAL HAS BEEN MET.	BEEN MET.
STROKE OR TIA	O YES O NO	(
PERIPHERAL VASCULAR DISEASE	YES O NO LIPID GOALS MET? O YES	S C
ABDOMINAL AORTIC ANEURYSM	O YES O NO PLEASE DOCUMENT LIPID GOAL COMPLIANCE ABOVE.	OMPLIANCE ABOVE.
PREV FORM (CTRL+PGUP) NEXT FORM (CTRL+PGDN)	(L+PGDN)	CLOSE

FIG.4A

LIPID O&E.CCC LISA LIPID LIPID O&E INFORMATION	COPYRIC	COPYRIGHT 2001 CLINICAL CONTENT CONSULTANTS, LLC
LIPID MANAGEMENT MOST RECENT LABS LIPI	LIPID FLOWSHEET	VIEW CURRENT LIPID MEDS THERAPEUTIC: RECOMMENDATIONS
'NT PANEL	II RISK FACTORS	LIPID GOAL CALCULATOR BASED ON # RISK FACTORS CLICK ACTION BUTTON FOR NCEP RECOMMENDED LIPID GOALS. TO
/о нкт) O C	CHANGE THE RECOMMENDED VALUES, ENTER DIFFERENT VALUES DIRECTLY IN THE FIELDS BELOW.
HDL < 40 MG/DI O HDL > 60 MG/DI (NEG RISK FACTOR)	• • •	CHOL: LDL: ADL: TRIG:
	O YES	LUE: 250 172 44 NTE: 02/07/2001 02/07/2001 02/07/2001
SMOKING STATUS CURRENT O HYPERTENSION		NEXT DUE: 6-8 WEEKS 6-8 WE
GINA, MI, CABG	YES	CONSIDER INTERVENTIONS TO LOWER LDL. HDL. GOAL HAS BEEN MET. TRIGLYCERIDE GOAL HAS BEEN MET.
STROKE OR TIA PERIPHERAL VASCULAR DISEASE		LIPID GOALS MET ? O YES O NO
ABDOMINAL AORTIC ANEURYSM) YES O NO	PLEASE DOCUMENT LIPID GOAL COMPLIANCE ABOVE.
PREV FORM (CTRL+PGUP) NEXT FORM (CTRL+PGDN)	(NDS)	CLOSE

FIG. 4B

OF		1 [
COPYRIGHT 2001 CLINICAL CONTENT CONSULTANTS, LLC	CLICK ACTION MEDS THERAPEUTIC RECOMMENDATIONS LIPID GOAL CALCULATOR BASED ON # RISK FACTORS CLICK ACTION BUTTON FOR NCEP RECOMMENDED LIPID GOALS. TO CHANGE THE RECOMMENDED VALUES, ENTER DIFFERENT VALUES CHANGE THE RECOMMENDED VALUES, ENTER DIFFERENT VALUES DIRECTLY IN THE FIELDS BELOW. HX OF CAD, PVD, CWA, TIA OR AORTIC ANEURYSM CHOL: LDL: ADL: ADL: TRIC: CHOL: LDL: ADL: ADL: TRIC: LAST DATA: 02/07/2001 02/07/2001 LAST DATA: 02/07/2001 02/07/2001 LAST DATA: 02/07/2001 02/07/2001 LAST DATE: 6-8 WEEKS 6-8 WEEKS 6-8 WEEKS TAL LIPID GOALS HAVE NOT BEEN MET. CONSIDER INTERVENTIONS TO LOWER LDL. HDL GOAL HAS BEEN MET. TRICLYCERIDE GOAL HAS BEEN MET. LIPID GOALS MET? O YES O NO PLEASE DOCUMENT LIPID GOAL COMPLANCE ABOVE.	
PYRIGHT		
	FACTORS OOOOOOOOOOOOOOOOOOOOOOOOOOOOOOOOOO	
	LIPID FLOWSHEET III RISK FACTO O YES	
LISA LIPID JFORMATION	NT PANEL INT PANEL RT RT < 55 < 55 < 55 CURRENT YSM	
LIPID O&E.CCC LISA LIPID LIPID O&E INFORMATION	LIPID MANAGE NCEP ADULT TRE AGE 55 OR GREATER EARLY MENOPAUSE W DIABETES HDL < 40 MG/DI HDL > 60 MG/DI AND IN FEMALI MI IN FEMALI MI IN MALE SWOKING STATUS HYPERTENSION ASHD—LVH, ANGINA, STROKE OR TA PERIPHERAL VASCULA ABDOMINAL AORTIC A	

FIG.4C

COPYRIGHT 2001 CLINICAL CONTENT CONSULTANTS, LLC THERAPEUTIC RECOMMENDATIONS TORS O NO CHANGE THE RECOMMENDED VALUES, ENTER DIFFERENT VALUES O NO CHOL: O NO CHOL: O NO CHOL: O NO LAST DATA: CONSIDER INTERVENTIONS TO LOWER LDL. HDL GOAL HAS BEEN MET. O NO D NO	CLOSE
LIPID FLOWSHEET VIEW LIPID FLOWSHEET VIEW O YES © NO	PGDN)
LIPID O&E. CCC LISA LIPID LIPID O&E INFORMATION LIPID MANAGEMENT MOST RECENT LABS NCEP ADULT TREATMENT PANEL III RISK FACTORS AGE 55 OR GREATER CARDIOVASCULAR DISEASE: HDL > 60 MG/DI (NEG RISK FACTOR) FH OF CARDIOVASCULAR DISEASE: MI IN MALE AGE < 55 MI IN MALE AGE < 55 SMOKING STATUS CURRENT O YES O YES O YES O YES O YES O YES ASHD-LVH, ANGINA, MI, CABG STROKE OR TIA PERIPHERAL VASCULAR DISEASE ABDOMINAL AORTIC ANEURYSM O YES O	PREV FORM (CTRL+PGUP) NEXT FORM (CTRL+PGDN)

1G.4D

						_													 	 	 	
	COPYRIGHT 2001 CLINICAL CONTENT CONSULTANTS, LLC		VIEW CURRENT LIPID MEDS THERAPEUTIC RECOMMENDATIONS	LIPID GOAL CALCULATOR BASED ON # RISK FACTORS	CLICK ACTION BUTTON FOR NCEP RECOMMENDED LIPID GOALS. TO	CHANGE THE RECOMMENDED VALUES, ENTER DIFFERENT VALUES DIRFCTLY IN THE FIFTOS BELOW.		OR MORE RISK FACTORS <20% 10V	CHOL: LDL: ADL:	250 170 40		1 1002/10/20 1 02/10/20 1 02/10/20 2 NOVER 2 NOVER 2	NEXT DUE: 5 MONITS 5	ALL LIFTID GUALD FLAVE NOT BEEN MET.	CONSIDER INTERVENTIONS TO LOWER LDL. HDL GOAL HAS BEEN MET.		LIPID GOALS MET ? O YES O NO	PLEASE DOCUMENT LIPID GOAL COMPLIANCE ABOVE.			CLOSE	
	COPYRI		LIPID FLOWSHEET	PANEL III RISK FACTORS	O YES NO) YES O NO	YES NO	YES NO		● YES ○ NO) YES O NO	QUIT O NEVER	O YES O NO) YES O NO	YES O NO) YES O NO	YES O NO			(CDN)	7
LIPID O&E.CCC LISA LIPID	LIPID O&E INFORMATION	LIPID MANAGEMENT	MOST RECENT LABS	NCEP ADULT TREATMENT PANEL III	AGE 55 OR GREATER C	EARLY MENOPAUSE W/O HRT	DIABETES	HDL < 40 MG/DI	HDL > 60 MG/DI (NEG RISK FACTOR)	FH OF CARDIOVASCULAR DISEASE:	MI IN FEMALE AGE < 55	MI IN MALE AGE < 55	SMOKING STATUS O CURRENT O	HYPERTENSION	ASHD-LVH, ANGINA, MI, CABG	STROKE OR TIA	PERIPHERAL VASCULAR DISEASE	ABDOMINAL AORTIC ANEURYSM			PREV FORM (CTRL+PGUP) NEXT FORM (CTRL+PGDN)	

FIG.4E

C	<u>L</u>	
LIPID 0&E.CCC LISA LIPID LIPID 0&E INFORMATION COPYRIGHT 2001 CLINICAL CONTENT CONSULTANTS, LLC	THE PATIENT'S 10 YEAR CORONARY HEART DISEASE RISK IS CALCULATED TO BE: 6% THE FOLLOWING 7 CATEGORIES ARE USED TO CALCULATE THIS RISK PROFILE: [VIEW CATEGORIES]] NCEP III CRITERIA TO DETERMINE DESIRED LDL GOALS: LOGICIAN MESSAGE AGE T POINTS SYSTOLIC BP SMOKING STATUS DIABETES O POINTS LYH YES FIFT NO	PREV FORM (CTRL+PGUP) NEXT FORM (CTRL+PGDN)

IG.4F

UPID O&E.CCC LISA LIPID LIPID O&E INFORMATION COPYRIGHT 2001 CLINICAL CONTENT CONSULTANTS, LLC	THE PATIENT'S 10 YEAR CORONARY HEART DISEASE RISK IS CALCULATED TO BE: 21%	THE FOLLOWING 7 CATEGORIES ARE USED TO CALCULATE THIS RISK PROFILE: [VIEW CATEGORIES] N	NCEP III CRITERIA TO DETERMINE DESIRED LDL GOALS:	COPYRIGHT 2001; CLINICAL Q POINTS ERVED); ID #:CCC.0024	PREV FORM (CTRL+PGUP) NEXT FORM (CTRL+PGDN)

FIG.4G

1					Ĺ	<u> </u>		
			RECOMMENDATIONS	# RISK FACTORS ENDED LIPID GOALS. TO NTER DIFFERENT VALUES ELOW.	OF AORTIC ANEURYSM ADL: TRIG: 40 200 4 198 2/07/2001 02/07/2001	-8 WEEKS 6-8 WEEKS EEN MET. DL GOAL HAS BEEN MET. EN MET	Ο Θ Θ	CLOSE
	X		TOM HDL	- 23X	· · / 8383 ·	. XI ।	গ্র । । গ্র	
		:LUDE:	TRIGLYCERIDE	X3 - X3	ស៊ · ស៊ីស៊ · ស៊	. हो	ស៊ីស៊ី	
		OR HYPERLIPIDEMIA INC	CHOLESTEROL	YES	ស៊ីស៊ីស៊ី : ស៊ី :	សិសិសិ	YES NERVOSA YES YES YES Y CEMIA YES SEE SECOND PAGE (?2) FOR MORE	YES [[NO
	MESSAGE	SECONDARY CAUSES FOR HYPERLIPIDEMIA INCLUDE	DRUGS	ANTHYPERTENSIVES THIAZIDES LOOP DURETIC B-BLOCKER	GLUCOCOTICOIDS ANDROGENS DCAS ESTROGENS PROGESTINS GROWTH HORMONE	AMIODARONS FACUETINOIN CYCLOSPORIN CONDITIONS	METABOLIC DIABETES HYPOTHYROIDISM ANOREXIA NERVOSA OBESITY PREGNANCY ACROMEGLY HYPERGLYCEMIA	
	MATION LOGICIAN		VE IME	REATM ER W/O	(NEG R ULAR D NLE AG	NA PE	SCULAR DI FILE ANEU PLEASE INSTR SECOND	[a
	LIPID O&E INFORMATION		LIFIU MAIVAGEME MOST RECENT LAB	NCEP ADULT TREATM AGE 55 OR GREATER EARLY MENOPAUSE W/O	HDL < 40 MG/DI HDL > 60 MG/DI (NEG R FH OF CARDIOVASCULAR D MI IN FEMALE AG	MI IN MALE AGE SMOKING STATUS HYPERTENSION ASHD—LVH, ANGINA, M	STROKE OR TIA PERIPHERAL VASCULAR DI ABDOMINAL AORTIC ANEU PLEASE INSTR [24] [?2] SECOND	PREV FORM (CTRL+PGUP)

FIG. 4 I

									-					<u> </u>					• • • • • •					_
			RECOMMENDATIONS	# RISK FACTORS	ENDED LIPID GOALS, TO	ELOW.	OF AORTIC ANFIIRYSM	ADI - TRIG.	ſ		1006/20/	-8 WFFKS 6-8 WFFKS		DI COM LIAS BEEN MET	EN MET.		0N ①						CLOSE	
	X		LOW HDL .			"	(0	٠,							0				æ					
			<u>S</u>		1	YES	YES	跹	ı	1	ı		1	1 5	<u>3</u> ı	1 1			CLASS (€			
		E (CONTINUED):	TRIGLYCERIDE		1	1	YES	-/+	YES	1	YES		YES	YES	; ;	VES -	l		NT OF LIPID DISORD ROL COUNCIL 1995		UPIDEMIA -41, 1994 (CLASS	F		
		HYPERLIPIDEMIA INCLUD	CHOLESTEROL		YFS	YES	YES	-/+	YES	1	1		1	YES	, YE	1 (l	UD HAWKINS DW	HANDBOOK ON THE MANAGEMENT OF LIPID DISORDERS NATIONAL PHARMACY CHOLESTEROL COUNCIL 1995 (CLASS A)		SECONDARY CAUSES OF HYPERLIPIDEMIA MED. CLIN. NORTH AM 78.117-41, 1994 (CLASS A)	YFS NO		
	MESSAGE	SECONDARY CAUSES FOR HYPERLIPIDEMIA INCLUDE (CONTINUED):		CONDITIONS (CONT)	Liver disorders Hepatotoxin	CHOLESTISIS	RENAL DISEASES NEPHROTIC SYNDROME	CHRONIC RENAL FAILURE	SIE	RHEUMATOID ARTHRITIS	PANCREATIS	DIETARY FACTORS	ALCOHOL ABUSE	HIGH FAT DIET	LOW FAI DIE! HIGH CHOLESTEROL DIET	WEIGHT GAIN	נוופנו נוסבוג מורו	SOURCES: MCKANNEY JM AND HAWKINS DW	HANDBO	STONE NJ	SECONI MED. C			
	OGICIAN	(c.)	7																					
LIPID O&E.CCC LISA LIPID	LIPID O&E INFORMATION LOGICIAN	LIPID MANAGEME	MOST RECENT LAB	NCEP ADULT TREATM	AGE 55 OR GREATER	EARLY MENOPAUSE W/O	DIABETES	HDL < 40 MG/DI	HDL > 60 MG/DI (NEG R	FH OF CARDIOVASCULAR D	MI IN FEMALE AG	MI IN MALE AGE	SMOKING STATUS	HYPERTENSION	ASHD-LVH, ANGINA, M	STROKE OR TIA	PERIPHERAL VASCULAR DI	ABDOMINAL AORTIC ANEU	INSTR	FI RECOND	3		PREV FORM (CTRL+PGUP)	

FIG.40

an F

LIPID O&E.CCC LISA LIPID	
LIPID O&E INFORMATION COPYRIGHT 2001 CLINICAL CONTENT CONSULTANTS, LLC	LC
LIPID MANAGEMENT	
MOST RECENT LABS LIPID FLOWSHEET VIEW CURRENT LIPID MEDS THERAPEUTIC RECOMMENDATIONS	1 S
NCEP ADULT TREATMENT PANEL III RISK FACTORS	?
AGE 55 OR GREATER	يد ٢
ENOPAUSE W/O HRT O YES O	ភ្ន
DIABETES O NO CAN TA OB AORTIC ANELIDYSM	100
HDL < 40 MG/DI OYES ONO CHOIC INC. AND TRIG.	E C
LOGICIAN MESSAGE	
H OH OH	
PATIENT HAS KNOWN CORONARY ARTERY DS. LDL CHOLESTEROL IS STILL ABOVE 100. CONSIDER INCREASING THE DOSE OF THE CURRENT 7/200 HMG COA REDUCTASE INHIBITOR (STATIN) IF ALREADY ON MAXIMAL DOSE, THEN CONSIDER CHANGING TO ANOTHER STATIN, ADDING 1/200 DEEDED TO A LIDIN SPECIAL SERVICE OF THE DOSE OF THE CURRENT AND A LIDIN SPECIAL SERVICE OF THE STATIN, ADDING 1/200 DEEDED TO A LIDIN SPECIAL SERVICE OF THE STATIN ADDING 1/200 DEEDED TO A LIDIN SPECIAL SERVICE OF T	7/2001 weevs
HYPERI YES [[NO]]] <u>La</u>
ASHD—	
STROKE OR TIA O YES O NO	
PERIPHERAL VASCULAR DISEASE ○ YES ○ NO LIPID GOALS MET ? ○ YES ◎ NO	
ABDOMINAL AORTIC ANEURYSM O YES O NO	
INSTRUCTION BY DIETICIAN OR TRAINED PERSONNEL? © YES O NO ADJUNCTIVE MEASURES INCLUDE AEROBIC EXERCISE [21] [22] SECONDARY CAUSES OF HYPERLIPIDEMIA RULED OUT? © YES O NO WEIGHT MANAGEMEN, ASA, VITAMIN E, MY W/FOLICE	COSE
COUNSELED ON ADJUNCTIVE MEASURES? © YES	SIES
PREV FORM (CTRL+PGUP) NEXT FORM (CTRL+PGDN)	OSE
	7

FIG.4L

LIPID O&E.CCC LISA LIPID		
LIPID O&E INFORMATION	COPYRIGHT 2001 CLINICAL CONTENT CONSULTANTS, LLC	INSULTANTS, LLC
LIPID MANAGEMI LOGICIAN	MESSAGE	
MOST RECENT LAB	CRITERIA FOR DETERMINING WHEN REPEAT LIPID PROFILES ARE DUE:	RECOMMENDATIONS
Ź ₩	IF PATIENT HAS CORONARY ARTERY DISEASE:	# RISK FACTORS
AGE 55 OR GREATER	1) IF NOT ON STATIN AND LDL > 100, THEN RECHECK LIPIDS IN 6-8 WEEKS.	ENDED LIPID GOALS. TO TER DIFFERENT VALUES
DIABETES	2) IF NOT ON STATIN AND LDL < 100, THEN RECHECK LIPIDS IN $3-6$ Months. 2) If on Statin and LDL > 100, then recheck lipids in 3 months.	ELOW.
HDL < 40 MG/DI	4) IF ON STATIN AND LDL < 100, THEN RECHECK LIPIDS IN 3-6 MONTHS.	OR AORTIC ANEURYSM
HDL > 60 MG/DI (NEG R	If patient has diabetes:	DL: TRIG:
FH OF CARDIOVASCULAR D	1) IF NOT ON STATIN AND LDL > 100, THEN RECHECK LIPIDS IN 6-8 WEEKS.	200
MI IN FEMALE AG	2) IF NOT ON STATIN AND LDL < TOO, THEN RECHECK LIPIDS IN 3-5 MONTHS. 2) IF ON STATIN AND LDL > 100, THEN RECHECK LIPIDS IN 3 MONTHS.	2/07/2001 02/07/2001
MI IN MALE AGE	4) If on statin and LDL $<$ 100, then recheck lipids in 3-6 months.	-8 WEEKS 6-8 WEEKS
HYPERTENSION	IF NEITHER CAD OR DIABETIC:	
ASHD-LVH, ANGINA, M	2 OR MORE RISK FACTORS AND LDL > 130, THEN RECHECK LIPIDS IN 3 MONTHS.	DL GOAL HAS BEEN MET.
STROKE OR TIA	O RISK FACTORS AND LDL > 190, THEN RECHECK LIPIDS IN 3 MONTHS.	EN MEI.
PERIPHERAL VASCULAR D	DUE NOW IF NO LIPIDS HAVE EVER BEEN DONE OR THE LAST SET > 1 YEAR AGO,	9 O
ABDOMINAL AORTIC ANE	OTHERWISE IF ON STATIN, RECHECK LIPIDS IN 3-6 MONTHS, OTHERWISE IF NOT ON STATIN, RECHECK LIPIDS IN 1 YEAR.	MPLIANCE ABOVE.
	*** NOTE: ALL LIPID DUE DATES WILL BE THE SAME DATE AND ARE SYCHRONIZED WITH THE LDL DUE DATE ***	
	YES 1/2 [[NO]]	
PREV FORM (CTRL+PGUP) NEXT FORM	(CTRL+PGDN)	CLOSE

FIG.4K

LIPID O&E.CCC LISA LIPID	
LIPID O&E INFORMATION COPYRIGHT 2001 CLINICAL CONTENT CONSULTANTS, LLC	CONSULTANTS, LLC
LIPID MANAGEMENT	
MOST RECENT LABS LIPID FLOWSHEET VIEW CURRENT LIPID MEDS THERAPEUTIC: RE	THERAPEUTIC: RECOMMENDATIONS
NCEP ADULT TREATMENT PANEL III RISK FACTORS LIPID GOAL CALCULATOR BASED ON # RISK FACTORS	ON # RISK FACTORS
AGE 55 OR GREATER	COMMENDED LIPID GOALS. TO
0	t, ENIEK DIFFEKENI VALUES LDS BELOW.
O YES O NO	TIA OR AORTIC ANFLIRYSM
40 MG/DI O YES © NO L	ADI: TRIG:
Market	×
NOTE: LAST SGOT > 50 (BUT LESS THAN 3 TIMES THE UPPER LIMIT OF NORMAL) AND IS ON AN HMG COA REDUCLASE INHIBITOR (STATIN MONITOR LET'S CLOSELY EVERY 4-6 WEEKS UNTIL RETURN TO NORMAL. CONSIDER HOLDING THE STATIN IF LET'S REMAIN) ELEVATED OR ARE CLIMBING.	STATIN IF LFT'S REMAIN) 7/2001 WEEKS
ASHD-	
STROKE OR TIA O YES O NO	
PERIPHERAL VASCULAR DISEASE O YES O NO LIPID GOALS MET? O YES	0N ①
ABDOMINAL AORTIC ANEURYSM O YES O NO	
INSTRUCTION BY DIETICIAN OR TRAINED PERSONNEL? © YES O NO ADJUNCTIVE MEASURES INCLUDE AEROBIC EXERCISE [21] [22] SECONDARY CAUSES OF HYPERLIPIDEMIA RULED OLIT? © YES O NO WEIGHT MANAGEMEN, ASA, VITAMIN E, MVI W/FOLIC	S INCLUDE AEROBIC EXERCISE ASA, VITAMIN E, MVI W/FOLIC
COUNSELED ON ADJUNCTIVE MEASURES? © YES O NO	ACID, EVALUATE ETOH CONSUMPTION STOSTANOL ESTES NUTRITION SUPPLEMENT
PREV FORM (CTRL+PGUP) NEXT FORM (CTRL+PGDN)	CLOSE

-1G.4M

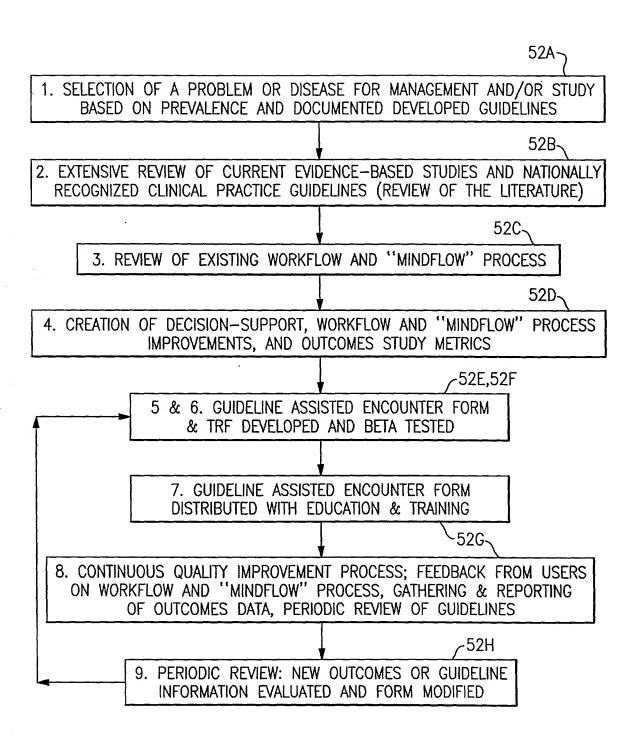


FIG.5